CHESHUNT

Urban District Council.

ANNUAL , REPORT

FOR THE YEAR

→ 1897. H

BY

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D.P.H., R.C.S., R.C.P., LOND.

M.O.H.

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To the Chairman and Members

OF THE

Urban District Council for Cheskunt.

GENTLEMEN,

I have the honour to lay before you my report on the sanitary condition of your District during the year 1897.

The usual forms provided by the Local Government Board giving tabulated information as to the incidence of different diseases and the mortality at different periods of life are appended.

From form "B" you will see that the number of notifications of infectious diseases has largely exceeded that of former years, the second half of the year being remarkable for the unusual number of cases of diphtheria and scarlet fever reported.

In table "C" I give a comparison of the year's population, births and deaths, with those of the last 10 years, which will give a rough idea of the general health of your District.

GENERAL SANITARY CONDITION.

The area of your District is 8,430 acres.

The population estimated to the middle of the year was 11,023, that is 1.3 persons to the acre;

the great mass of the population being, however, concentrated in the lower part of the District.

The number of occupied houses in the middle of the year was 2,318. There are, therefore, on an average, 4.75 persons in each house; the average in 1891 being 4.5. The increase of the population has for the last few years been most apparent in the Cheshunt Street Ward, where a great many new houses have been built. Now, however, large numbers of small houses are being built at Waltham Cross. Eleanor Road, formerly open to the fields on the north side, will now be more shut in by a new street parallel to it which is being laid out. As the ground becomes more thickly covered with houses it will be the more necessary for you to give your attention to the sanitary condition of the houses, both new and old.

The number of births registered was 344—Males, 181; Females, 163. The birth rate was 31·2 per thousand.

The number of deaths registered was 141. The usual corrections having been made, the number 144 was found as that from which the death rate could be calculated.

The death rate was 13.06 per thousand.

The number of deaths under one year of age was 39, giving an infant mortality rate of 113.4 per 1,000 births.

The number of deaths from the seven principal zymotic diseases was 32, the death rate from zymotic diseases being 2.8.

Diphtheria and Diarrhæa were the two diseases which principally contributed to this, there being 14 deaths from each of these diseases. Typhoid Fever caused three deaths and Measles one.

METEOROLOGY.

Less than the average amount of rain fell during the year, July, October and November being exceptionally dry months.

RAINFALL IN INCHES FOR EACH MONTH OF THE YEAR 1897 COMPARED WITH
THE AVERAGE FOR 10 PREVIOUS YEARS,

Mon	th.		1897.	Average.
January	•••		1.71	1.65
February	•••	• • •	1.83	1.52
March	•••		2.79	1.66
April	•••		1.38	1.35
May			1.55	2.10
June			2.53	1.66
July		1	.40	2.7
August			2.70	2.92
September			2.25	1.7
October			•51	3.03
November			•81	2.48
December			2.21	1.70
Total			20.67	24.52

An appreciable quantity of rain fell on 141 days during the year.

INFECTIOUS DISEASES.

The cases reported under the Infectious Diseases (Notification) Act were the following:—

Searlatina. Diphtheria. Erysipelas. Typhoid.

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First Half-year	 10	9	10	5
Second Half-year	 60	57	2	1
\mathbf{Totals}	 70	66	12	6

Scarlet Fever.—Though 70 cases were reported, no deaths resulted. In a good many instances the disease could be traced to a previous case, but with one or two exceptions the cause of that case could not be ascertained. A case returned from Hospital on March 28th, and another case occurring on April 11th

in the same house, I found the first case desquamating, probably after a second attack. Another case in the house occurred, and two more in houses near. November another "return case" occurred. August, as usual, children were sent down from London by charitable people, and one of these brought Scarlet Fever with him. Several cases could be, directly or indirectly, referred to this. Probably many cases were not reported, perhaps not recognised. On visiting one of the schools I found two children desquamating freely, though those in charge of them thought they had only "colds." In the same school several cases occurred after a pupil teacher had been attending from a house containing a Scarlet Fever patient. My remonstrances were met by the statement that "the doctor said there was no danger till the fifth day." Twelve cases of Scarlet Fever were sent to the Isolation Hospital at Enfield—some others could not be admitted.

DIPHTHERIA.—In the first half of the year 9 cases were reported, all ending in recovery. In the last six months 57 were reported, with 14 deaths. Ten of these cases occurred in Eleanor Road; 17 in Waltham Cross and High Road; S in Cecil Road and Burleigh Road. Though the other cases were scattered about, the greater number were in the Waltham Cross district. The usual difficulty was found in tracing the disease from one case to another, but at one time the Trinity Schools appeared as a centre from which the infection spread, and I advised that the schools should be closed. This was done and the schools disinfected. Trinity schools were also closed for a time, as the teaching staff were all involved by one case of Diphtheria, which could not be isolated. This epidemic did not exhibit the virulence and activity of the epidemic of 1885, or I fear the results would have been far more serious. With the exception of three, all the houses in which cases occurred were favourable

to the occurrence of Diphtheria, and no surprise need be felt that so many cases did occur. In some instances several weeks intervened between the attacks of different members of one household. In one instance, the first case was on Aug. 27th; the second, Nov. 2nd; the third, Nov. 14th. The third case may, perhaps, have been the result of the second; but the second case was probably due to the condition of the house, which has now been partially remedied. Badly drained, damp and dark houses are those in which Diphtheria will generally be found, and this epidemic has only emphasised a well-known fact. I maintained a supply of anti-diphtheritic serum for the use of all the medical practitioners, and in the cases under my own care found great benefit result from its exhibition.

Typhoid Fever.—Five cases were reported in the first half-year—two in a house to which a case had been imported in 1896, and of which the drainage was found deficient. A third proved not to be Enteric Fever. Another could be accounted for by the condition of the house in which a previous case had occurred; whilst the fifth case was evidently imported. One case in the latter half of the year was also probably imported.

Diarrhea.—Infantile Diarrhea caused deaths in all parts of the district alike. As I have before pointed out, Infantile Diarrhea forms a good test of the sanitary condition of a neighbourhood. As in the case of Diphtheria, dark, damp and hadly drained houses are those in which it is most likely to occur.

INSPECTION.

The north side of Eleanor Road was chosen as the site of inspection this year, as many cases of Diphtheria had occurred there. A trench was dug at the back of

the houses to find any drains that might be left communicating with the surface water drain into which sewage was formerly discharged; the existing drains were tested by smoke; search was made for old cess pits, and the houses were examined by your Surveyor and myself. This was a work of considerable time, which was, however, well expended, as the greater number of the houses were found in a terribly unsanitary condition.

There were 48 houses examined. Of these six could be regarded as really sanitary dwellings, though in two of them some slight defects required to be made good. The drainage of all the others was defective in many cases so much so that it was hard to imagine how any builder could have constructed it. In some cases sewers were run under houses without the necessary ventilation and, so far as we could see, without the necessary concrete. If laid under the houses with the same want of care as outside the result may be imagined. The rain water drainage and surface drainage was also generally defective, in some cases non-existent, damp proof courses absent, and the floors level with the ground outside. The walls were more or less damp in all, in some cases wet for four or five feet above the floors, and 12 of the houses were in such a condition that I reported them to you as in so dangerous a state as to be unfit for human habitation. I am glad to be able to state that water from your mains was laid on to almost all these houses.

I also wish to mention that these houses were built before 1876, when the Public Health Act came into operation.

Action has been taken under the Housing of the Working Classes Act with regard to the houses I reported as unfit for habitation, and you have given instructions that the drainage of the other houses

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should be rectified as required, but I am of opinion that in many cases some method of preventing damp rising in the walls and from the ground under the floors is required. The water in the old walls we came across was at a depth of 6ft. or 8ft. below the surface in gravel, but above the gravel is stiff loam, which holds a large quantity of water, and without damp courses or ventilation by airbricks I fear these houses must always be damp. Six ashbins were found in this inspection of 48 houses.

DAIRIES AND MILKSHOPS.

The inspection of Dairies hardly comes within my duties, as the Council has appointed an Inspector who reports directly to them, but in the course of the inspection of Eleanor Road I came across one, and found it necessary in my enquiries into cases of Diphtheria to visit two others.

In one, a new one, and therefore, I presume, authorised by the Council, I found a water-closet and two gullies leading to the sewer, whilst no proper provision was made for washing the cans. In another it was stated that the cans were filled and the milk "worked" out-of-doors in a yard, but close to a lumber shed, and the water the cans were finally rinsed in was drawn from a well adjoining a large cattle The third, also an old one, communicated very freely with a dark, unflushed and unventilated watercloset. Although, after full consideration, I do not think the milk supply has been the means of spreading disease, there can be no doubt that the condition of these Dairies constituted a serious danger to the public health. The Council have the power of making and enforcing Regulations for the Management of Dairies, but until now have not done so. Some regulations are now being printed. which certainly do not err in being

too stringent. As an instance, I may mention the drainage. The gully trap is not allowed inside a house or even a stable, but must be placed outside, and I think this is quite of as much importance in a Dairy.

WATER SUPPLY.

In the earlier part of the year there was a little anxiety about the full supply owing to the want of rain, but by judicious management a good supply was kept up, and arrangements have now been made for ensuring a plentiful supply in the future.

DRAINAGE.

The condition of the sewers in your district has been good. Several complaints were made of that in Eleanor Road, and an additional ventilator was erected. As the particular manholes of which complaint was made were sealed up, I think it probable the smell experienced came in reality from the surface water drains. These have received your attention, and I have heard no complaint for the last few months. The sewerage of the Hammond Street district has not yet been commenced. A great improvement in the scheme has been affected by the inclusion of Appleby Street, and as sanction has been obtained to this scheme I hope it will be carried out during this year.

The Council are fully aware of the fact that a great deal of the work of draining houses into the sewers, done a few years ago, has been very badly performed. The drains in Eleanor Road are an example, and similar conditions will often be found as inspection is made. The duty is thus entailed on you of making frequent and thorough inspections, and of insisting that such defective conditions be rectified.

I am happy to say that the new work now carried on is of a very different description, and will not be such a constant source of danger.

REMOVAL OF REFUSE.

This is still carried on through a contractor. Taking into consideration the fact that very many houses have no ash pit, but the refuse is thrown into a heap, often against the wall of the house, I think it would be better if the refuse were removed oftener than once a month. It is a matter of great difficulty to get this work thoroughly done, and this difficulty is rather increased when the refuse has to be shovelled up off the wet ground.

PREVENTION OF INFECTIOUS DISEASES.

The means you possess for this purpose are decidedly limited.

The Notification Act is in force, and works well so far as it goes.

Isolation.

Cases of Scarlet Fever are received at Enfield, where there is room for them, but there is generally a day's delay in getting the patient sent there, and this of itself is very unfortunate. To keep a Scarlet Fever case in a cottage with other children for a day after the diagnosis is made entails a distinct probability of having to send more patients.

For no other diseases have you any means of isolation, and I am of opinion that the want of means of isolation has had a distinct and tangible influence in the spread of Diphtheria during the last six months.

Disinfection.

The disinfection of houses is performed by the burning of sulphur in the presence of steam. Though

not anything like perfection, this method has, to the best of my knowledge, acted very well, better than I had dared to hope; but it is impossible to thoroughly disinfect a house whilst it is inhabited, and you have no means of disinfecting clothing and bedding.

Disinfectants are freely provided in every case of infectious disease; but, of course, a very great deal depends on the way in which they are used. The great danger is entailed by the common idea that a little of almost any substance put on a sheet or in a saucer, or poured down a drain, will keep the inmates of a house safe from infection. A sheet hung before a door will not keep a cat in the room, much less the poison from a Scarlet Fever or Diphtheria case.

A case of Diphtheria being reported at a dairy in February, the owner at my request attended a meeting of the Council, and readily promised to carry on his business in such a manner as would prevent the chance of spreading the disease. This promise he kept loyally and no case occurred amongst his customers.

HOUSING OF THE WORKING CLASSES ACT.

I have had occasion to report 19 houses under this Act during the year. Seven of them have been dealt with, and the first notices have been served in the other 12 cases, which were only reported in December.

BYE-LAWS.

Your revised Bye-laws, as sanctioned by the Local Government Board, are now printed and enforced.

In my report of September 14th I had to mention to you that your Bye-law No. 19 had not in some cases been complied with, and pointed out to you the evils that might result therefrom, which was emphasised by the fact that all the cases of Diphtheria had occurred in houses in the building of which this Bye-law had been disregarded. Your attention being thus drawn to it, the Bye-law will, I have no doubt, be more strictly enforced in the future.

I congratulate the Council on their decision that for the future all house drains shall be laid on a bed of good concrete. Had this rule been previously observed, much of the trouble and expense now entailed by relaying drains of only a few years of age would have been avoided.

I would also draw the Council's attention to their Bye-law No. 15, which in many cases is disregarded.

During the year 1898 I hope that the Council will continue the systematic inspection of drains of houses which has been commenced in Eleanor Road.

Though it must be very disappointing to find that so much work recently done must be gone over again, it is undoubtedly wiser to face existing evils and remove them than blindly to disregard the hidden danger. Knowing the many difficulties encountered and the serious amount of work entailed, I heartily congratulate the Council on their determination to remedy the evils existing.

The work of sewering Hammond Street, Appleby Street and Stockwell Lane, which you will perform this year, is a matter of great importance, and will practically complete the sewerage of your district, and as large building operations will probably only be carried on in the neighbourhood of existing sewers, you will not be under the necessity of undertaking more for some time.

A.— Table of Deaths classified according to Diseases and Ages.

At all Ages.	Under One Year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.		Diphtheria.	Enteric or Typhoid.	Measles.	Diarrhwa.	Rheumatic Fever.	Phthisis.	Bronchitis, Pneumonia & Pleuvisy.	Heart Disease.	Injuries.	All other Diseases.	Total.
141	39	21	13	8	29	31	Under 5. Over 5.	8	1 2	1	14	1	4	12 11	7	1 5	24 44	60 81
	The subjoined numbers have also to be taken into account in judging of the above records of mortality.																	
a10	1	_		_	3	6	Under 5 Over 5.	-		-	-		1	1	1	 -	6	1 9
b2	_	1	_	1	_	_	Under 5. Over 5.	1	 -	- -	_	-	 -	-		_ 1	_	1 1

a Deaths occurring ontside the district among persons belonging thereto. b Deaths occurring within the district among persons not belonging thereto.

B.—Table of Population, Births and New Cases of Disease known.

Population	of all ages.			Searlatina.	Diphtheria.	Typhoid.	Erysipelas.
Census 1891.	Estimated to middle of 1897.	Registered Births.	Under 5	10	s s	T	
9620	11,023	344	Over 5	60	58	5	12

Number of such Cases removed from their Homes in the several Localities for Treatment 1.1 Isolation Hospital, 12 (Scarlatina).

C.—Statistics for the Year 1897 in comparison with the Averages of the Figures for the last 10 years.

Population Births Deaths Deaths from Zy Birth-rate per I Death-rate per Zymotic Death- Deaths under 1	1,000 1,000 -rate	•••	 	10,571 301 135 16 28·5 14 . 1·4	$11,023 \\ 344 \\ 141 \\ 32 \\ 31 \cdot 2 \\ 13 \cdot 06 \\ 2 \cdot 8 \\ 113 \cdot 4$
Deaths under 1	year pe	r 1,000 bi	rths		113.4



